



10/709578

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<b>PATENT APPLICATION FEE DETERMINATION RECORD</b>	Application or Docket Number <b>47399-0037</b>
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CLAIMS AS FILED - PART I					SMALL ENTITY		OR		OTHER THAN SMALL ENTITY		
(Column 1)		(Column 2)			RATE	FEE			RATE	FEE	
FOR	NUMBER FILED	NUMBER EXTRA									
BASIC FEE (37 CFR 1.16(a))											
TOTAL CLAIMS (37 CFR 1.16(c))	26	minus 20 =	*	6	x \$ 18 =	108	OR		x \$ 0 =	0	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	4	minus 3 =	*	1	x 86 =	86	OR		x 0 =	0	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ 0 =	0	OR		+ 0 =	0	
					TOTAL	964	OR		TOTAL	0	

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II					SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		(Column 3)	RATE	ADDI- TIONAL FEE			RATE	ADDI- TIONAL FEE
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA						
	Total (37 CFR 1.16(c))	* 26	Minus	** 26	=	0	OR		x \$ 0 =	0
	Independent (37 CFR 1.16(b))	* 4	Minus	*** 4	=	0	OR		x 0 =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =	0	OR		+ =
					TOTAL ADDIT. FEE	0	OR		TOTAL ADDIT. FEE	0

AMENDMENT B					SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		(Column 3)	RATE	ADDI- TIONAL FEE			RATE	ADDI- TIONAL FEE
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA						
	Total (37 CFR 1.16(c))	* 23	Minus	** 26	=	1	OR		x \$ =	0
	Independent (37 CFR 1.16(b))	* 4	Minus	*** 4	=	0	OR		x =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =	0	OR		+ =
					TOTAL ADDIT. FEE	0	OR		TOTAL ADDIT. FEE	0

AMENDMENT C					SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		(Column 3)	RATE	ADDI- TIONAL FEE			RATE	ADDI- TIONAL FEE
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA						
	Total (37 CFR 1.16(c))	*	Minus	**	=		OR		x \$ =	0
	Independent (37 CFR 1.16(b))	*	Minus	***	=		OR		x =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =	0	OR		+ =
					TOTAL ADDIT. FEE	0	OR		TOTAL ADDIT. FEE	0

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.  
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